

Commissioner's Weekly Wrap Up

DCS Communications Office

July 2, 2004

This Week In Central Office

Monday, June 28

Commissioner Miller conducted supervisory training for the Mid-Cumberland, South East and Davidson Co. regions. The training was held at TPS in Nashville. Special thanks to the Woodland Hills staff for providing food for Monday's event!

Wednesday, June 30

Commissioner Miller gave closing remarks at the Biennial Child Welfare Conference in Washington D.C.

Check out the corresponding press release in the [DCS Newsroom](#).

Sunday, July 4 is Independence Day ... but who started the celebration?



On June 11, 1776, the Second Continental Congress held a meeting in Philadelphia and formed a committee with the express purpose of drafting a document that would formally sever their ties with Great Britain.

Thomas Jefferson, who was considered the strongest and most eloquent writer, crafted the document. The final version was officially adopted by the Continental Congress on **July 4, 1776**.

The following day, copies of the **Declaration of Independence** were distributed and, on July 6, *The Pennsylvania Evening Post* became the first newspaper to print the extraordinary document.

On July 8, 1776, the first public readings of the Declaration were held in Philadelphia's Independence Square to the ringing of bells and band music.

One year later, on **July 4, 1777**, Philadelphia marked Independence Day by adjourning Congress and celebrating with bonfires, bells and fireworks.

Speaking of July ... Send Us Your July DCS Events!

When submitting your **July** events for posting on the Internet calendar, please remember to include the following information:

- ✓ County and region
- ✓ Name and phone number of MAIN contact person
- ✓ Time, Date, Location and Purpose of event

In other words ...

From your pen to your peers

Throughout the summer, the weekly wrap up will periodically feature essays by regional field and central office staff. South East Region Foster/Adopt Recruiter **Angela Miracle writes this week's essay:*

Although I am a recruiter for the Southeast region, I have also had previous experience with the Community Services Agency (CSA).

While with CSA, I managed the Independent Living fund that is funneled through CSA for DCS children 14 and above. While I think the incentives are a wonderful idea, they are so specific that it is difficult for the children and foster parents (and sometimes the case managers) to understand well enough to use it effectively.

One specific incentive comes to mind: the fund will pay up to \$35 dollars for a year book. CSA must have a bill before they will pay, then the foster parent, child, and worker must remember to get the bill to someone so that they will have enough time to get a check to the yearbook provider.

I am sure that a majority of our children do not utilize this resource because they either do not have the knowledge about this fund or do not remember to get all the information to their case manager.

While this is a minor problem in the Independent Living program, I did want to point it out.

Secondly, I also feel that the age to begin looking at working with a child on Independent Living should be younger, at least start at 12 years old. It also grieves my heart to think that these children are not thinking about their long-term goals and just focusing on survival.

I know at 15, we may only see to 18. Then when we get there, we see that there is much more to learn. But a child that is 15 in state custody seems to only think, only three more years and I will be out of state custody

and will go back home or to where they want to go.

I spoke with one 17 year old, and his goal is to make it until he gets out of custody. And even though he may not be going back home, he stated that he did want to go back to his community. And I shared that story when I spoke to a Rotary Club not long ago.

These children may realize that they can't or do not want to go back to the place they lived, but they do want to go back home--to their community--where they came from. That is why it is so important for the community to step up to the plate as well to help us care for these children. And I know that is something that we are trying to accomplish.

I have personally enjoyed Dr. Miller's essays. And I hope that everyone has taken the time to read them. We shared the essay on "Lifebooks and Lifeboxes" in our most recent edition of our Newsletter for resource parents. And I have shared several of Dr. Miller's views with my current PATH class.

I, too, feel that our foster parents are our greatest assets. And I view them as our partners.

Our region recently met with private providers to discuss our recruitment and retention plan, and a lot of ideas regarding recruitment and retention revolved around **training** and **support**.

I feel that PATH is a good beginning for foster parents, but I have told my current PATH class that it is Foster Parenting 101, and that it is crucial (and required) to attend the core courses and other trainings offered by DCS and private providers. [We discussed sharing our trainings with each other (DCS and private providers) so that we could offer more training to all the resource parents.]

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I feel that sometimes our resource parents don't value the training offered and come only to "get their hours in." I would love to change their feelings on that, and I'm sure not all of our resource parents feel that way. The other aspect mentioned of recruitment and retention is support.

A private provider stated that they are there for their foster parents 24/7, to listen, encourage, provide support. And we at DCS provide 24/7 support as well, but I feel that sometimes they don't feel like they are getting the support they need. Our Foster Parent Advocate is on the phone all day dealing with foster parents. I am truly thankful for her, but I feel that our resource parents don't feel like they get support when they need it or either they are not asking for it from DCS. I just feel that this is an area that we need to improve in.

One of our prospective parents asked in PATH class, "If I am willing to take a child with behaviors that I have not dealt with before, will there be support and help when I need it?" This is something that all the regions deal with.

The home county case manager is dealing with all aspects of a child in custody--birth parents, foster parents, and serving as legal parent. Their plates are full. We are trying very hard in our region to provide support when needed.

Our Regional Administrator Sandi Holder set aside time one day a month to meet with resource parents and she meets with the Foster Parent Advocate one day a month as well.

Although support is offered, I just feel that the resource parents don't utilize it for whatever reasons...and then they don't know how to deal with a child and try to do it alone until they can't do it any longer.

The challenge before us is to make sure that resource families know the resources available to them and offer support and additional training. We are certainly looking at all avenues to do this, whether through a newsletter, a magnet with a telephone

number, and providing opportunities to receive training.

In closing, I would like to thank Dr. Miller for her vision and all that she is doing to make this department better, and her energy and excitement has trickled down to all of us. It is no small task and no easy task that we do every day.

As I tell our prospective resource parents, "whether you have a child for two weeks, two years or for a lifetime, you can make a difference in that child's life and they will remember you for it."

Angela Miracle
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A Word of Thanks from Commissioner Miller ...

Please accept my deepest thanks to the many, many of you who have written about the weekly essays. Because of your input, they will continue but in a slightly different format. I will write one a month and members of the core leadership have signed up for the other weeks for the next three months. Several of you made that suggestion and I thank you for it.

Also, in the responses we received, it became obvious to us that you have something to say. We've already asked two or three of you to contribute essays based on your e-mails in response to mine. If others of you would like to be contributors, let [Margie](#) know.



Blue Ribbon Update

by Mary Beth Franklin

TennCare and the Law

EPSDT back in federal court

You may already be aware that there is a contempt petition that has been filed against the state of Tennessee in the John B consent decree. The consent decree is about Early Periodic Screening Diagnosis and Treatment or EPSDT services for children who receive TennCare. DCS is also named as a party in the consent decree. This means that DCS agreed to a set of requirements regarding the TennCare Services for the children we service.

The federal judge in this case, John T. Nixon, appointed a special master to monitor the state's progress in implementing an array of action steps related to the lawsuit. Special master, Dr. Richard Carter requires the state to submit updates on a specialized work plan that was developed. There are also status conferences held in federal court with all agencies and parties to review the lawsuit. Some of the work done by the health units is included in the work plan updates to the court.

Commissioner Miller attended these status conferences. The Commissioner is required to update the court about DCS projects related to TennCare and EPSDT. Health lawyer, Mary Jane Davis accompanied the Commissioner and may have to give further reports.

At the May 20th status conference, the Plaintiff's (the Tennessee Justice Center represents the TennCare "class" of children in the consent decree) filed a motion for the state to show cause why it should not be held in contempt in the John B case.

The special master indicated that a TennCare plan to increase the number of children screened (all TennCare children,

not just those in DCS custody) was insufficient.

In addition, the Plaintiff's asked questions about TennCare Transformation which is the Governor's new initiative to transform TennCare.

Since that time, the state has been required to submit information that has occurred regarding EPSDT since 2001. This was a *discovery* request. DCS provided a great number of reports, memos, and emails, and Mary Jane worked all weekend organizing these materials.

The court hearing on the contempt petition is scheduled to begin August 9.

EPSDT continues to be part of our everyday work at DCS

What does EPSDT look like at DCS?

Here at DCS we take our children to the health department for screenings, follow up when the Health Dept. nurse indicates a special follow up is needed, make appointments at mental health centers for assessments and other treatment, and we access medical and behavioral services for children every day.

When we take our children for the screenings we are conducting **Early Periodic Screening** and we access services, also known as **Diagnosis and Treatment**.

EPSDT services will help our children:

- Return to home
- Adjust to foster homes
- Adjust in adopted homes

EPSDT helps children in the care of DCS obtain Permanency!

Each time you gather medical records, take a child to the doctor, call a foster parent to update them about the child's medical or behavioral progress, pick up a prescription, enter in the 7 components and the screening date into TNKids, call and make a follow up appointment, or hold a CFTM with the EPSDT results, you are coordinating EPSDT services for children in care!

Recently, under our new Services and Appeals Tracking project or SAT we have a web based application to track identified services, appointments, and completed services. This application coordinates with TNKids. It is designed to help support YOUR work and provide data to assist with accessing services and tracking appeals. Each time you access and document services, file an appeal, or update TNKids on services, you are developing a compliance trail that is being monitored by federal court. Please support your Health Unit and the new SAT support, so they can support the work you do for children!

You are the catalyst for making EPSDT happen for our children.

Statewide, as of April 29 DCS had:

- ✓ **96%** of all children completing EPSDT appointments for screenings.
- ✓ **70%** received those screenings in 30 days.
(The Well Being division wants that number to go UP)
- ✓ **85%** of children received dental screenings in the past year

In addition to screenings and accessing Services, DCS also agreed to:

- Educate Case managers and Foster Parents about EPSDT services and how to access EPSDT services
- Provide an adequate network of services in the residential services that we provide. The DCS "geo-access" standard for the TennCare residential treatment services we provide are 75 miles from county of origin or within the home region or by waiver of the RA- just like our current DCS policy as *defined* with Brian A implementation-- but remember, our TennCare geo-access standard applies to **ALL children** in care)

TennCare Agreed

Tenn Care Agreed to make sure that children in care get specialized services they need, and TennCare developed the COE (Center of Excellence) contracts for children in and at risk of Care. Our Commissioner is working with TennCare and the COEs to enhance and expand the COEs so that they are statewide and provide the range of services needed by DCS.

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EPSDT is Everyday at DCS!

Regardless of lawsuits, discovery, and contempt petitions, DCS will continue providing EPSDT services 24/7 for children in care.

Thank you for everything you do for EPSDT. You are making it Happen!

Thank you to the many personnel who assisted us this week by copying documents!



Action is a great restorer and builder of confidence. Inaction is not only the result, but the cause of fear. Perhaps the action you take will be successful; perhaps different action or adjustments will have to follow. But any action is better than no action at all.

Norman Vincent Peale

"Every man who accomplishes things sees first in his mind what he wishes to do. He puts away all doubt. It makes no difference how small or how large the thing you want to do may be; if you have an unlimited confidence in your ability to do it, you will do it.

Charles Fillmore

Don't be afraid to give your best to what seemingly are small jobs. Every time you conquer one it makes you that much stronger. If you do the little jobs well, the big ones will tend to take care of themselves.

Dale Carnegie

When the obstacles become stimulants and self-motivators, the failures will obviously transform themselves into success stories.

Lakkoju Goutam

Love many things, for therein lies the true strength, and whosoever loves much performs much, and can accomplish much, and what is done in love is done well.

Vincent Van Gogh

Leaders don't force people to follow ... they invite them on a journey.

Charles S. Lauer
